

2017 AUG -8 PM 40 10

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (for candidates)

	t = (i.e. candidates)
This Report Covers Calendar Year: 2016	
□ORIGINAL REPORT	
MENDED REPORT	
I currently hold an office that would require me to file a Tier 2.1, or Tier 3	Personal Financial Disclosure
bacterian As such, I have completed SCHEDULE D.	
Office Sought: Orleans Parish City Council- District B	In complete the City of City
Date of Elections; 2000 or 14, 1017.	Incumbent:☐ Yes 🛛 No
NAME OF FILER (printfull name): Jay H. Banks	
Mairing Address: P.O. Box 19922	
City, State. Zip: New Orleans, La 70179	
NAME OF SPOUSE(if applicable) (print full name): Artelia Bennett-Bank	5
Spoure's Occupation. Community	
Spouse's Principal Business Address: 1827 Peniston St	
City, Scate, Yop: New Orleans, La 70115	-
CHECK ALL THAT APPLY	
☑ I have filed my state income tax return for the previous year.	
My I have med for an excension of my state income tay return for the persional	year.
I have filed my federal income tax return for the previous year.	
☐ I have filed for an extension of my federal income tax return for the previous	is year.
NOTE. La R.S. 1 200485.7 and 4001. 24.2 does not provide candidates the opportunity personal financial disclosure statements.	y to request an extension in filing their
I am a candidate in an election to be held prior to April 15 and I have not fil previous year.	ed my tax return for the
CERTIFICATE OF ACCURACY	
do hereby certify that the information contained in this personal fina	ncial disclosure statement is touc
State of the second and belief.	and a statement is diffe
Signature of the -	

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Schedule A: Employment Information

☐ Check if not applicable		
⊠Filer ∐Spouse	⊠Full-Time □Part-Time	:
Name of Employer: Dryades		
Job Title; Director Scho		
Job Description: ^dmi	nistrator	
□Filer ØSSpouse	⊠Full-Time □Part-Time	
Name of Employer: State of L	buisiana Department of Children & Family Services	
Job Title: Program Spec		
Job Description: Cond	ucts Quality Control Reviews for SNAP program	-
Filer Spouse	□Full-Time □Part-Time	
Name of Employer:		
Job Tatie:		
Filer [Spanse]		
	□Full-Time □Part-Time	•
Total Vision		
jou ixae.		
Job Description:		· ,
Filer ∏Spouse		
Table Visita		
JUNIANE.		
John Description		

- * You are required to disclose employment information related to both you and your spouse (if applicable).
- * List the maine of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is following or part-time.
- * Self-employment information is reported on Schedule B.

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Schedule B: Positions - Business

Check if not applicable

□Filer □Spouse	□ Rath		
Amount of Interest:		%	
Name of Business:	The State of the Control of the Cont		NI N
1 A. J. Mariana and			
City, State, Zip:	•		•
Business Description:			
Nature of Association:			
□Filer □Spouse			
Amount of interest:	Phones Company	%	
Name of Business:	Sand frilling		
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Business Description:			
Nature of Association:	No. Strick Edit Symmetry Const.		
∏Filer ∐≾pouse			
Amount of Interese		<u></u> %	
Name of Business:			
£ 4 3			
City, State, Zip:			
Business Description:			
Nature of Association: _			
The second secon	· · · · · · · · · · · · · · · · · · ·	The state of the s	

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Form 416B

^{*} You are inquired to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustness is a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

^{* &}quot;Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, treatment, or any other legal entity or person.

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Schedule C: Positions - Nonprofit

Check if not applicable
⊠Filer ∐Spouse
Name of Organization: New Orleams Jazz & Heritage Foundation
Address: 1205 M. Rampart St
City, State, Lip. New Orleans, LA 70116
Nature of Association Board Member
Description of Organization: Promote and preserve music, arts and heritage of communities in Louisiana
Tiler jöpouse
Name of Gyganization;
Address:
City, State Zip:
Nature of Association:
Description of Organizations
□FilerSpouse
Name of Organization:
Address
City, State, Zip:
Nature of Associations
Description of the anizations

*You are required to complete SCREDULE Cif you or your spouse is a director or officer of a nonprofit organization.

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Schedule D: Other Offices/Positions Held

Check if net applicable	
Name of Office/Position:	Ernest N. Morial Exhibition Hall Authority/ Commissioner
7 T N N N N N N N N N N N N N N N N N N	
Name of Office/Position:	
Name of Office/Position:	
Name of Office/Position:	
Name of Office/Position:	
Name of Office/Position:	

^{*} You are required to complete SCHSDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.

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Schedule E: Immovable Property

Filer	∏Spouse		the interest in the parcel exceeds \$2,000)	
	·	⊠Both		
ı	of Property:			
State:	Louisiana		Parish/County: Orleans	
	ption of Property			
Value of t	the Interest in the			
		I (Issa than \$5,000)	Category II (\$5,000-\$24,999)	
	Commence of the second control of the second	D1 (\$25,000 -\$ 100,000)	Category IV (more than \$100,000)	
□Filer	∏Spouse	$\boxtimes Both$		
Location of	of Property:			
State;	Louisiana		Parish/County: East Baton Rouge	
Descrit	ptica of Property:	house		
i .	de Interest in the			
	Category!		Category II (\$5,000-\$24,999)	
	[[] Category I	H (\$25,000-\$100,000)	Category IV (more than \$100,000)	
∏Filer	[]Spouse	□Both		· · · · · · · · · · · · · · · · · · ·
Location o	of Property:			
State:	***************************************		Parish/County:	
Dogodin	otion of Property:		t drish/ codincy.	
	ie Interest in the l	Paragli		
		(leas dian \$5,000)	Category II (\$5,000-\$24,999)	
	Gategory (II (\$25,000- \$1 00,000)	Category IV (more than \$100,000)	
Filer	()Spouse	□Both		
	I Property:			•
State:	driopedty:			
	man newskip of the newskip seems		Parish/County:	
	tion of Property:			
value of th	e interest in the I		<u> </u>	
		(lers than \$5,000)	Category II (\$5,000-\$24,999)	
		[(\$25,000 -\$1 00,000)	Category IV (more than \$100,000)	I
You and radio	『 修物が始める the k 北地 to provide a brid	TIBORY State and	parish/county. immovable property and its fair market value or use	
Luc hederaci	habitalish the ussesso.	Purposes of ad	valorem taxes.)	
Revision	ber 2016		Parish // Could y:	www.ethics.la.gov

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Schedule F: Income from the State, Political Check if not applicable Subdivisions, and/or Gaming Interests

Filer Spouse Eusiness(where amount of interest exceeds 10%)
Type of Income: ⊠State □Political Subdivision □ Gaming Interest
Name of Business (if applicable): State of Louisiana, Department of Children & Family Services
Name of Income Source-State of Louisiana, Department of Children & Family Services
Address: SEA start
City, State, Zip: Balan Hange, LA 70802
Amount of income (exact dollar emount): \$ 59,652.00
☐Filer ☐Spouse ☐Business(where amount of interest exceeds 10%)
Type of income:
Name of Businessijif applicable):
Name of Income Source:
Address:
City, State, Alp:
Amount of Income (exact dollar amount): \$
File: Spause Business(where amount of interest exceeds 10%)
Type of lacouse Political Subdivision Gaming Interest
Name of Businesstit applicable):
Name of Income Source
Address:
City, Sezee, Asp:
Amount of income (seet dellar emount): \$

* "Income" (for a heafiness) means gross income less costs of goods sold, and operating expenses.

* "racoma" (for an indexidual, research texable income and shall not include any income received pursuant to a life insurance policy.

* The deficition is good grow give of political subdivision, gaming interest, and business are found in the Instructions Section of this form

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^{*} You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

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Schedule G: Income Received from Employment

FAX No.

Check if not applica	bie	• •
⊠Filer ∐Spous	9 []Fall-time □Part	-time
Name of Employer:	Oryadas YMCA	
Addicess: 1740	Vickson Ave	
Sity, Alate, Eli	O. Mew Orleans, LA 70113	
Nature of services (p	ourseant to such employmen	t): Director of School of Commerce
Amount of Enoune.	Category (less than \$5,000) Gategory III (\$25,000-\$100,000)	☐ Category II (\$5,000-\$24,999) ☑ Category IV (more than \$100,000)
ł –	Part-	
Name of Employer	The state of the s	
Addresm		
City, Stace, Wig	<	
Nature of services (p	arsuant to such employmen	t);
Amount of *scome:	Category III (\$25,000-\$100,000)	Category II (\$5,000-\$24,999) Category IV (more than \$100,000)
Filer Lipuaso	∏hill-time □Part-	time
Name of Employer .		
Address:	of desires and the second of the special second of the special second of the second of	
City, Stake, Ap		
Nature of segment (g)	क्षाड्यस्थात to such employment	The state of the s
	Category III (\$25,000-\$100,000)	Category II (\$5,000-\$24,999) Category IV (more than \$100,000)

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^{*} You are required to complete SCHROULE G to disclose the income received by you or your spouse for each full-time or partialities programs assistion held.

^{* &}quot;Income" (for an individual) means taxable income and shall not include any income received pursuant to a life income active and income received pursuant to a life.

^{*} Income that is reported an SCHEOUSE F does not have to be restated on SCHEDULE G.

^{*} Income race vertible read and properties reported on SCHEDULE H, unless it is reported on Schedule F.

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Schedule H: Income Received From Business

Check Wrot applicable
AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS:
Category I (see that \$5,000) [Category II (\$5,000-\$24,999)
Category IV (52.5,000 st00.000)
□Filer : □Spouse
Name of Busines.
Address
City, State Typ.
Nature of services rendered or reason income was received:
Filer Spense .
Name of Business:
Address:
City, State, Tip:
Nature of services rendered or reason income was received:
Filer Hageway
Name of Business
Addrage.
City, State, Zip:
Nature of as referendered อาการason income was received:
THE Space
Name of Business
Address:
Chy, State Zing
Nature of sendings yeadered or reason income was received:

- * You are secure so no comprise GCHEDFORE Hilf you or your spouse received income from a business.
- * "Pactories" (in the British of the British and Shall not Include any Income received pursuant to a life insurance policy.
- * Income reproduct on a CHEDULE For G does not have to be restated on SCHEDULE H.
- * INCOME TRANSPORT THROUgh self-employment is reported on SCHEDULE H.
- * "Business" means any concernation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise perfection is classed any concernity, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise perfect and concernity of the concernity of the

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Schedule I: Other Income

TIME LONG TO STATE OF THE STATE			
Description of income:			
Motors specially in a secure was ex-			
Nature of services pende	red or reason income was re	ceived:	
- Atcount of Income	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
	(\$25,000-\$100,000)	Category IV (more than \$100,000)	
EFRE: E Spouse	Plane		
Description of income			
	•		
Nature of services render	and or reason income was rec	witted.	
The state of the s	red or reason income was red		
	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
Amount of incomer Prite: []Sponse	Category I (less than \$5,000)		
Amount of Integral	Category I (less than \$5,000)	Category II (\$5,000-\$24,999)	
Amount of incouns Piler Spouse Description of Income:	Category I (less than \$5,000)	Category II (\$5,000-\$24,999) Category IV (more than \$100,000)	
Amount of income [Briler []Spouse Description of income Nature of services render	Category I (less than \$5,000) Lategory III (\$25,000-\$100,000)	Category II (\$5,000-\$24,999) Category IV (more than \$100,000)	

- * You are required to examplete SUREDULE I if you or your spouse received any other type of income (includes any income from private souther such as remaind income, federal retirement, etc.) that exceeded \$1,000.
- * "Income" (for an individual) mases caxable income and shall not include any income received pursuant to a life insurance policy.
- * You are not required to request income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that க அற்ற கட்டிக்க stead மா stead மார். G, or H does not have to be restated on SCHEDULE I.
- Income (ron) nativement accounts not reported on Schedule F should be included on Schedule I.

Revisad December 20.13

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Schedule J: Investment Holdings

Check if not applicable	(an investment holding that exceeds \$5,000)
□Filer □Spouse Name of Security	[] Both
Description of Security:	
Effer Espaise Nome of Security	
Description of tempings	· ·
When the state of	
Description of Security -	

Revised December 2013

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^{*} You consequence of a securities of the SCHEOULE Liftyou or your spouse holds investment securities where each investment security has a value that exceeds \$5,000.

^{*} You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, now other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government from a life objects equivalent investments.

^{*} You are not required to disclose of a mation concerning any property held and administered for any person other than you or your spouse under a trust, butorship, curatorship, or other custodial instrument.

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Schedule K: Transactions

☐ Check if not applicable (a transac	tion that exceeds \$5,000)
□Filer □Spouse □Both	
Transaction Date:	
Description of Trapagation:	
Amount of Thurspectors [Category I Gess than \$5,	.000) Category II (\$5,000-\$24,999)
[Category III (\$25,000-\$	
□Filer □lyouse □Both	
Transsiction Date:	
Description of Transaction:	
Amount of Transaction: Cawgory I (less than \$5,	000)
Category III (\$25,000-\$1	
Eller Charte Eleth	
Transaction date.	
Description of Transaction.	
Amount of Transaction: Category l (less than \$5,0	000) Category II (\$5,000-\$24,999)
Category III (\$25,000-\$1	

* You are not see alread to report variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bootis, case or restricted investments.

Revissi December 2016

Form 416B

^{*} You are required it complete it misses. If you or your spouse purchased or sold any immovable property, personally owned tex credit certificates. Stocks, bonds, as commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (when the value of the first of the property of the p

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Schedule L: Liabilities

(a liability that exceeds \$10,000)
·

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^{*}You are required to complete SCHEDULE LIF you or your spouse owes any liability which exceeds \$10,000 on the last day of the reporting praced.

^{*}You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which control the loan.

^{*}You are not required to disclose any finding, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse for a business in which you or your spouse does not use another finding is a loan, that you or your spouse does not use another's form the loan (in personal use unrelated to business.

^{*}You know a second and the following any least by a licensed financial institution which loans money in the ordinary course of business.

^{*} You are not required to discloss any leability resulting from a consumer credit transaction as defined in R.S. 9:3516(13).

^{*}You are not regard to be disclosed any wan from an immediate family member, unless such family member is a registered lobbyist, or his principal of a registered lobbyist, or unless such family member has a contract with the area.

^{***}Consumer Credit transactions is the selfS16(13) means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made a consumer in the P.S. 6:969.3 et seq.